



**Inspection Report
under the *Long-Term
Care Homes Act, 2007***

**Rapport d'inspection
prévue le *Loi de 2007
les foyers de soins de
longue durée***

Ministry of Health and Long-Term Care
Health System Accountability and Performance Division
Performance Improvement and Compliance Branch

London Service Area Office
291 King Street, 4th Floor
London ON N6B 1R8

Bureau régional de services de London
291, rue King, 4^{ème} étage
London ON N6B 1R8

**Ministère de la Santé et des Soins de
longue durée**

Division de la responsabilisation et de la performance du
système de santé
Direction de l'amélioration de la performance et de la
conformité

Telephone: 519-675-7680
Facsimile: 519-675-7685

Téléphone: 519-675-7680
Télécopieur: 519-675-7685

Licensee Copy/Copie du Titulaire Public Copy/Copie Public

Date of inspection/Date de l'inspection	Inspection No/ d'inspection	Type of Inspection/Genre d'inspection
March 17, 2011	2011-190-9576-17Mar112334	Complaint L-000308
Licensee/Titulaire		
The Corporation of the County of Essex, 360 Fairview Ave. West, Essex, ON N8M 1Y6		
Long-Term Care Home/Foyer de soins de longue durée		
Sun Parlour Home for Senior Citizens, 175 Talbot Street East, Leamington, ON N8H 1L9		
Name of Inspector/Nom de l'inspecteur		
Sandra Fysh #190		
Inspection Summary/Sommaire d'inspection		
<p>The purpose of this inspection was to conduct a complaint inspection related to the care and services of a resident.</p> <p>During the course of the inspection, the inspector spoke with the Resident, Administrator, Assistant Director of Care, a Registered Nurse and a Registered Practical Nurse.</p> <p>During the course of the inspection, the inspector reviewed the clinical record of one resident, reviewed policies and procedures of the home related to the inspection.</p> <p>The following Inspection Protocols were used during this inspection:</p> <ul style="list-style-type: none"> Hospitalization and Death <p><input checked="" type="checkbox"/> There are no findings of Non-Compliance as a result of this inspection.</p>		



Ministry of Health and
Long-Term Care

Ministère de la Santé et
des Soins de longue durée

Inspection Report
under the *Long-Term
Care Homes
Act, 2007*

Rapport
d'inspection prévue
le *Loi de 2007 les
foyers de soins de
longue durée*

Signature of Licensee or Representative of Licensee Signature du Titulaire du représentant désigné		Signature of Health System Accountability and Performance Division representative/Signature du (de la) représentant(e) de la Division de la responsabilisation et de la performance du système de santé.	
Title: _____ Date: _____		Date of Report: (if different from date(s) of inspection). <i>March 30, 2011</i>	